

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

MECEIVED TOWN OF BROOKLINE REGISTRARS OF VOTERS

Fill in Reporting Period dates: Beginning Date: **Ending Date:** 2010 Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution Candidate Full Name (if applicable) Committee Name Office Sought and District Name of Committee Treasurer Committee Mailing Address Residential Address Telephone Number (optional): Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-lind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: (Treasurer's signature) FOR CANDIDATE FILINGS ONLY: Affidave of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons activity under the authority of this committee in accordance with the requirements of M.G.L. c. 55. (Candidate's signature) Signed under the penalties of perjurys

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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ne 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		y y y
11. TOTAT D	ECEIPTS IN THE PERIOD	De-Cla	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

First	Last	Address 1	City	State	Zip	Date	Employer	Occupation	Amount	
Michael	Sandman	1160 Beacon Street	Brookline	MA	02446	1/4/10	Fuld & Co.	Senior VP	\$100.00	
Leanne	Doherty Mason	28 Upland Road	Marlboroug	MA	01752	2/16/10			\$50.00	
· · · · · · · · · · · · · · · · · · ·							New Pro			
Stephen	Driscoll	47 Shores Edge Drive	Pembroke	MA	02359	2/16/10	Wrestling	promoter	\$100.00	
•		;					Niki			
						04640	Tsongas for	 	6400.00	
Carol	Kanin	65 Stuart Rd.	Newton	MA			Congress	fundraiser	\$100.00	
Christina	Knowles	20 Dean St.	Norfolk	MA		2/16/10			\$30.00	•
David	Rockwell	162 Aspinwall Ave.	Brookline	MA		2/16/10			\$50.00	
Michael	Sandman		Brookline	MA				Senior VP	\$100.00	
Cheryl	Suchors	42 Mt. Vernon St.	Cambridge	MA	•	2/16/10			\$50.00	
Michael	Traister	71 Griggs Road	Brookline	MA .	02446	2/16/10		ì	\$50.00	·
John	Henn	155 Seaport Blvd.	Boston	MA	02210	2/17/10			\$50.00	
		648 Washington								
Joseph	Ross	Street	Brookline	MA	02446	2/17/10		<u> </u>	\$35.00	
Linda	Pehlke	48 Browne St.	Brookline	MA	02445	2/21/10			\$25.00	
Andrew	Bernstein	262 Clinton Road	Brookline	MA	02445	2/24/10	requested		\$75.00	
<u> </u>				-			Basile &			
Robert	Basile	40 Williams St.	Brookline	МА	02446	3/4/10	Company	President	\$150.00	
		902 West Roxbury			,					
Beverly	Basile	Parkway	Brookline	MA	02467	3/4/10	requested		\$100.00	
Linda	Carlisle	233 Fisher Ave.	Brookline	MA	02445	3/4/10	requested		\$100.00	
Rebecca	Pontikes	13 Ellery Street	Cambridge	MA	02138	3/4/10	self	attorney	\$300.00	
Betsy	DeWitt	94 Upland Rd.	Brookline	MA	02445	3/5/10	retired		\$150.00	
Rita	McNally	230 St. Paul St.	Brookline	MA	02446	3/5/10			\$25.00	
Margaret	Senturia	98 Crowninshield Rd.	Brookline	МА	02446	3/5/10			\$50.00	
Frank Smizik Committee		125 Coolidge St.	Brookline	MA	02446	3/5/10			\$100.00	
							R. Brown	,		
Ronald	Brown	84 High Street	Brookline	МА	02445	3/6/10	Partners	President	\$100.00	
Francis	Brown	17 Orchard Street	Medford	MA	02135	3/6/10			\$40.00	
Kenneth	Goldstein	111 Holland Road	Brookline	MA	02445	3/6/10	self	attorney	\$100.00	

Angus	McQuilken	1 Riverdale Road	Wellesley F	MA	02481	3/6/10			\$50.00	
							Manifest			
Ruben	Moreno	5 Catlin Road	Brookline	MA	02445	3/6/10	Equity	Founder	\$200.00	
Cindy	Rowe	93 Eliot St.	Brookline	MA	02467	3/6/10			\$50.00	
Carol	Schraft	5 Evans Rd.	Brookline	MA	02446	3/6/10	retired		\$100.00	
Maeghan	Silverberg	112 Belair Heights	Leominster	MA	01453	3/6/10			\$30.00	
	.,									
	·		1		1 1		National	ļ		
		•		1	l i		Consumer	1		
Chi Chi	Wu	14 Marion Terrace	Brookline	MA	02446	3/6/10	Law Center	attorney	\$100.00	
			:					speechwrite		
Jennifer	Armini	8 Russell St.	Marblehea	MA	01945	3/7/10	self	r	\$75.00	
				1	ł .		Access/Suc			
			1				cess			
Carol	Axelrod	323 Clark Road	Brookline	MA	02445	3/7/10	institute	Director	\$100.00	
Richard	Benka	26 Circuit Road	Brookline	MA	02467	3/7/10			\$25.00	
							Commonw			
							ealth of			
Glenn	Cunha	311 Clark Road	Brookline	MA	02445	3/7/10		attorney	\$100.00	
Nancy	Daly	161 Rawson Road	Brookline	MA	02445	3/7/10		attorney	\$200.00	
Robert	Daves	9 Upland Road	Brookline	MA	02445	3/7/10			\$50.00	
John	Dempsey	43 Brington Road	Brookline	MA	02445	3/7/10			\$30.00	
Martha	Farlow	8 Bowker Street	Brookline	MA	02446	3/7/10			\$50.00	
							Wizard of			
Sharon	Fradkin	22 James Ave.	Stoughton	MA	02071	3/7/10		owner	\$100.00	·
Harry	Friedman	27 Claflin Road	Brookline	MA	02445	3/7/10			\$15.00	
Thomas	Gallitano	146 Bonad Rd.	Brookline	MA	02467	3/7/10			\$25.00	
Roberta	Gianfortoni	93 Highland Ave.	Brookline	MA	02445	3/7/10			\$25.00	
Phyllis	Giller	69 Park Street	Brookline	MA	02446	3/7/10			\$20.00	
]		homemake		·	
Deborah	Goldberg	37 Hyslop Rd.	Brookline	MA	02445	3/7/10			\$250.00	
Mark	Gray	31 Harris St.	Brookline	MA	02446	3/7/10			\$50.00	
Michael	Jacobs	41 Coolidge Street	Brookline	MA	02446	3/7/10			\$25.00	
Pauline	Katz	55A St. Paul St.	Brookline	MA	02446	3/7/10			\$25.00	
Howard	Leibowitz	995 Centre Street	Jamaica Pla	MA	02130	3/7/10			\$50.00	

Melanie	Lown	68 Foster St.	Brighton	MA	02135	3/7/10			\$25.00	
Hugh	Mattison	209 Pond Ave.	Brookline	MA	02446	3/7/10			\$50.00	
Randolph	Meiklejohn	161 Cypress St.	Brookline	MA	02445	3/7/10			\$25.00	
Cameron	Merrill	119 Eliot St.	Brookline	MA	02467	3/7/10			\$25.00	
Judy	Meyers	75 Clinton Rd.	Brookline	MA	02445	3/7/10			\$50.00	
Colin	Moore	68 Foster St.	Brighton	MA	02135	3/7/10			\$50.00	
								Vice		
Gerry	Oster	17 Catlin Road	Brookline	MA	02445	3/7/10	PAI	President	\$100.00	
Evan	Rauch	10 Blueridge Ave.	Saugus	MA	01906	3/7/10			\$50.00	
Jonathan	Sclarsic	69 Joy Street	Boston	MA	02114	3/7/10		·	\$50.00	
Kim	Smith	22 Brington Road	Brookline	MA	02445	3/7/10			\$25.00	
							Federal Home Loan Bank of			
	C. Illiano	63 Languaged Ave	Brookline	MA	02446	2/7/10	Boston	Governmen t Relations	\$150.00	
Joanne	Sullivan	63 Longwood Ave.	brookine	IVIA	02440	3/1/10	Combined	Director of	\$130,00	
	·		Ì			-	Jewish	Leadership		i
			1	Ì			Philanthro	Developme		
David	 Trietsch	52 Linden Place	Brookline	MA	02445	3/7/10		nt	\$100.00	
David Roberta	Winitzer	1160 Beacon Street	Brookline	MA	02446	3/7/10		111	\$35.00	,
Christina	Wolfe	26 Searle Ave.	Brookline	MA	02445	3/7/10			\$50.00	····
	Wolff	50 Pleasant St.	Brookline	MA	02446	3/7/10			\$10.00	
Bruce Sarah	Wunsch	77 Brook Street	Brookline	MA	02445	3/7/10			\$50.00	
Robert	Amara	121 Norwich Circle	Medford	MA	02115	3/8/10		·	\$35.00	
Anthoný	Andreadis	687 Heath St.	Brookline	MA	02467	3/8/10			\$50.00	
Elizabeth	Childs	157 Walnut St.	Brookline	MA	02445	3/8/10			\$20.00	
Elizabetti	Cinus	137 Wantue St.	Brookiirie	IVIO	02443	3/0/10	Town of		\$20.00	
Thomas	Hantakas	109 Salman Street	West Roxbu	MA	02132	3/8/10	Brookline	Custodian	\$150.00	
Meggan	Levene	131 Sewall Ave.	Brookline	МА	02445	3/8/10			\$25.00	
Adam	Mitchell	87 Browne Street	Brookline	MA	02446	3/8/10	Save That Stuff	partner	\$100.00	
Sondra	Peskoe	125 Kent St.	Brookline	MA	02445	3/8/10		•	\$50.00	
Frank	Steinfield	160 Aspinwall Ave.	Brookline	MA	02446	3/8/10			\$25.00	

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			-				Mary		<u> </u>	•
•				l ·			Fifield		4.55.55	s.
Mary	Fifield	6 Beaufort Road	Jamaica Pla		02130			Owner	\$100.00	
Megan	Amundson	21 Chauncy St.	Cambridge	MA	02138	3/11/10			\$30.00	
			I				Harvard		1	
Donna	Kalikow	44 Circuit Road	Brookline	MA			<u> </u>	Director	\$100.00	
Pamela	Katz	29 Columbia St.	Brookline	MA	02446	3/11/10	requested		\$100.00	
William	Anderson	106 Davis Ave.	Brookline	MA	02445	3/12/10	l		\$25.00	
Evelyn	Roll	25 Adams St.	Brookline	MA	02446	3/12/10			\$15.00	
Henry	Warren	50 Gorham Ave.	Brookline	MA	02445	3/12/10			\$50.00	
Joanna	Baker	1824 Beacon Street	Brookline	MA	02446	3/14/10			\$50.00	
Jessica	Silbey	20 Columbia Street	Brookline	MA	02446	3/16/10			\$50.00	
							Basile &			
Robert	Basile	333 Heath Street	Brookline	МА	02467	3/19/10	Company		\$100.00	
								Political		
Michael	Falcone	72 Waltham Street	Boston	MA	02118	3/20/10	NARAL MA	Director	\$75.00	
Lynn	Mogell	7 Center Street	Provincetov	MA	02657	3/20/10			\$50.00	
- 7	<u> </u>	653 East South								
Erin	Cornell	Street	South Bosto	MA	02127	3/22/10			\$20.00	
Robert	Sperber	21 Lowell Rd.	Brookline	MA		3/22/10			\$25.00	·
Noah	Kaufman	1 Childs Road	Lexington	MA	02421	3/23/10			\$200.00	

Dean	Atkins	348 Franklin Street	Cambridge	МА	02138	3/24/10	Mintz Levin	attornev	\$200.00	
	7.00,000						Choate Hall			··
•							and			
James	DiTullio	20 Moon Street	Boston	MA	02113	3/24/10	1	Attorney	\$200.00	
,4171-0				_			Ropes and	i		
Brian	Elworthy	115 River Road	Merimac	МА	01860	3/24/10		attorney	\$250.00	
Dilan	Littoreny	Taxo Medi Medi					Commonw		¥ == = = = =	
	ł	÷		•			ealth of			
Bernard	Greene	25 Alton Ct.	Brookline	MA	02446	3/24/10		attorney	\$75.00	
Denial V	Oregine	25 Alton Ct.	DI OOMIIIC	141/7		J, 2-1 10			7,5,50	
Timothy	Schofield	120A Sutherland Rd.	Brighton	MA	02135	3/24/10	self	attorney	\$100.00	
Timothy	Scholleit	40 South Crescent	Diagricon	1417	02133	3/27/10	JU11	accorney	7100.00	
Nach	Shaw	Circle	Brighton	MA	02125	3/2///10	 Mintz Levin	lattorney	\$200.00	
Noah	JORIAN	<u> Urcie</u>	Dukuton	IVIA	05133	3/24/10	INITITE LEADIN	accomey	7200.00	<u> </u>

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		^					Asset			
			•		1.		Manageme		1	
Samuel	Slater	220 Boylston Street	Boston	MA	02116	3/24/10	nt	Principal	\$250.00	
Nathaniel	Stinnett	210 Lincoln St.	Boston	MA	02111	3/24/10	DLA Piper	attorney	\$250.00	
							Greater		1	
	•				1		Boston		1	
							Legal	N.		
Josh	Zakim	37 Westbourne Road	Newton	MA	02459	3/24/10	Services	attorney	\$200.00	
Abigail	Hemnes	3 Arlington Street	Cambridge	MA	02140	3/25/10	K&L Gates	Associate	\$200.00	
Joseph	Magner	5 Grist Mill Road	Acton	MA	01720	3/25/10			\$15.00	
Colin	Van Dyke	44 Zeller St.	Roslindale	МА	02131	3/25/10	Mintz Levin	attorney	\$200.00	
							ADS	account		
Casey	Atkins	85 Devonshire St.	Boston	MA	02109	3/27/10	Ventures	manager	\$200.00	•
Barbara	Scotto	26 Crowninshield Rd.	Brookline	МА	02446	3/28/10	retired		\$100.00	
Stanley	Spiegel	39 Stetson St.	Brookline	MA	02446	3/28/10			\$25.00	
Amy	Hummel	226 Clark Road	Brookline	MA	02445	4/8/10			\$50.00	
									\$8,580.00	

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need itemize only those over \$50. Expenditures of \$50 or less may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. If you do so, include your committee name

Date naid	To whom paid (listed alphabetically)	Address	Purpose of expenditure	Amou	ant
1/2/10	Show's Super marked	Commenwealth Ave Alk for MA	volunteer-sneeps	38.	1
1/3/10	Sarah Putnam Photography	320 Brookline St. Cemberdy, MARUSQ	photography	796.	88-
1/27/10	lutsand of Adz	399 luponset 5%; Centon, MA 62021	buttons	636.	69
2/11/10	NARAL Pro-Choice Massachusetts	Bochon MA oznos	event spiniorship	150.	ರಾ
3/1/10	Brookline League of Looman Volers	90 Box 67056 Chestrut Hill, MY orner	event sponsorship	75.	ථා
3/1/10	CTE Cindy Creem	Mountington Rd.	donation	100,	Ø
3/110	Fed Ex OFFICE	1370 Beacon St. Brookline, NA 02446	Copies	26.	30
3/2/10	United States Post OFFice	Brookbre Ut Hage Brook Line. Mozumo	Stamps	114.	40
3/5/10	Brookline Education Foundation	Brookly, MA 62006	spelling bee	300.	σο
3/410	the Publick House	Brookling MA rougs	Kick-off party	300.	æ
3/2/10	Brook line Sister City	85 Westborn-Terr. Brookline, MA 024116	event sponsorship	150	2
3/10/10	Sleps to Success	40 webster Pl. Brookline, MA ozuna	ovent sponsorship	250,	သ
3/18/10	Community Nowspaper Corp.	250 2 nd Auc. Bledham, NA ouggy	TAR ad	1424.	63
deglio	Mass. Democratic	Su Roland Sh Boston, MA 02129	sount sponsorship	250	ಶ
418/10	Brookline Community Mental Health Ctr.	Garrion Rd. Brooklie, MA ozuus	event entribution	250.	Ø
1/10/10	Brookline PAX	Brothic, MA brull	event sponsorship	250.	8
4/12/10 4/12/10	CTE Ayanna Pressley	Bestm. MA onza	donation	160	00
		Line 12: Total expenditures of	more than \$50 (or listed above)		T
		Line 13: Total expenditures of	of \$50 or less (not listed above)*	•	T
			enditures this period on page 1, line 4)	7145.	61

^{*}Receipts of \$50 or less may be itemized above. If you do so, include them in line 12 rather than line 13. Line 13 must include only receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need itemize only those over \$50. Expenditures of \$50 or less may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. If you do so, include your committee name

Date paid	To whom paid (listed alphabetically)	Address	Purpose of expenditure	Amount
4/13/10	Wizard of Adz	399 Deponset Son Canton, MA 02021	mailing	1560. 82
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	<u> </u>	1		1
·	<u> </u>	Line 12: Total armanditures	of more than \$50 (or listed above)	
	•	Line 13. Total expenditures	of \$50 or less (not listed above)	
		Line 14: Total ex	penditures this period ad on page 1, line 4)	

^{*}Receipts of \$50 or less may be itemized above. If you do so, include them in line 12 rather than line 13. Line 13 must include only receipts not itemized above. Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	•			
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$ \$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	CONTRIBUTIONS	(P)

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			*	

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

ommonwealth Massachusetts	
ile with: RECEIVED RECEIVED TOWN OF BROOKLINE City or Town Clerk or Election Commission Please print or type all information, except signatures; FRK	
Frease print or type an information, except signatures [ER]	
Fill in dates: Reporting Period Beginning 03 22 - 2010 Ending 04 16 201	0.
Type of report: (Check one) Sth day preceding preliminary 8th day preceding election 30 day after election byear-end report disconnection.	solution
Michael A. Burstein Burstein Brookline	$\overline{\gamma}$
Full Name of Candidate (if applicable) Library Trustee Townwick Normi S. Bustein	-
Office Sanght and Dictrict	- .
Residential Address Residential Address Rame of Committee Treasurer Po Box 1713 Brookling 14A 02446 Committee Mailing Address	-
	 .
Tel. No. (optional) Tel. No. (optional)	al)
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Symphome Bank	
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete str campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this repand represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the remainder the penalties of perjury: M.G.L. c. 55. Signed under the penalties of perjury:	norting period
Treasurer's signature (in ink) Date	- .
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)	
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete sta campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M. have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete sta campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this rep and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the req M.G.L. c. 55. Signed under the penalties of perjury: 4/20/10	G.L. c. 55. I
Candidate signature (in ink) Date	

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
3/26/10	Charles Ardgi, 333 Central Perh West New Yorks, NY 10025	\$300	(0	DC 360
4/1/6	John Parlman, 28 Daniel Drive Burlington, MA 01803	\$50	Op	Retired, None
#161b	Pavid Sqhavitz, New York, NY 10021	\$100	OO	Lyinger, Strawn LLP
		•		
\$ \$				
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Line 9:	Total receipts in excess of \$50 (or listed above)	\$450	Ö	
	Total receipts \$50 and under* (not listed above)	\$235	70	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	\$685	70	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above. Page 2

Burstein for Broshline

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	phabetical listing)		. 1		Amoun	
4/11/10	Brockling PAX Compaign Committee	Po Bx 470525 Problem MA 02447-0525	Canpaigh Cutribution	\$ 50	00		
4/16/10	Dr. Don's Butterns	3906 W. Homes Price Glandele, AZ 85308	Signs, Palm Cards Buttons	\$377	99		
4/16/10	Greenehouse Consulting	206 Mill St Newton MA 82460	Website design and mointenance	o t	<i>0</i> 0		
•							
•							
•							
•					-		
				_	•		
<u>.</u>		Line 12:	Expenditures over \$50	\$477	99		
• •		Line 13:	Expenditures \$50 and under*	6.	99		
1	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	9484	98		

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	·			
		**		
,				
			In-kind over \$50	
	· ,	Line 16: In-kind \$50 and under		
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
3/22/10	Stan Rubinswitz	117 Thorndike St. Brudding MA 02446	Collecting Signatures	\$75
		•		
•				
-	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	\$75

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4

Bustein for Brookline



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED TOWN OF BROOKLINE TOWN CLERK

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning San 1 Date 2010 Ending April Date 2010
Type of report: (Check one) Sth day preceding preliminary that day preceding election
Jennita Roes Committee e Local Jennites
Full Name of Candidate (if applicable) Cau Committee Name Sources
Office Sought and District Town Wide To Francis S7
50-5 Residential Address ST BUCOKING WAY 02446
V3 norh 1:40 Tel. No. (optional) 6/7-73/-16/1 Tel. No. (optional)
Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all
campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:
Treasurer's signature (in ink)
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of Signed under the penalties of perjury:

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amo	Amount Occupation & Employ (for contributions of \$200 o	
4/16/10	Gang Jones 70 Francis St Brookling MA 02446			Wniten
	MA 02 446	300	, _	,
4/16/10	Jennither Rees,	Qu	/ -	Project mgn
Z	Jennithen Rees, oan 18 hoodlike MA OXULL			
		:		
Line 9: To	otal receipts in excess of \$50 (or listed above)	-0	_	
	otal receipts \$50 and under* (not listed above) OTAL RECEIPTS IN THE PERIOD	400		Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/16/10	3703 Washing	They MA U2136	signs and	3>18
		••		
,	•			•
				·
			_	
		Line 12:	Expenditures over \$50	37 /8
			Expenditures \$50 and under*	
E	Enter on page 1, line 4		:TOTAL EXPENDITURES	3>18

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address Description of Contribution	Value
		Nove	
·			
		Line 15: In-kind over \$50	
		Line 16: In-kind \$50 and under	
	Enter on page 1, line 6	Line 17: Total In-kind	0

^{*} If an in-kind-contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
4/16/10	Jeny; Ans		Loah	0.00
		,		
				-
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	200

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4



RECEIVED TOWN OF BROOKLINE Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance 26 A 9:17

e with: y or Town Clerk or Election Commission	4/12/2
Reporting Period - Beginning: 1/1/2010	Ending: 4/16/2010
Type of report: Pre-election	
Susan Wolf Ditkoff	Susan Wolf Ditkoff for School Committ
Full Name of Candidate	Committee Name
School Committee	Dr. Joyce Wolf
Office Sought/ District	· Name of Committee Treasurer
145 Mason Terrace	1530 Beacon St. #1504
Brookline, MA 02446	Brookline, MA 02446
Residential Address	Committee Address
SUMMARY BALANC	E INFORMATION
Ending Balance from previous rep	
Total receipts this period:	\$0.39
Subtotal:	\$1,457.16
Total expenditures this period:	\$0.00
Ending Balance:	\$1,457.16
Total in-kind contributions this	
	-
Total outstanding liabilities:	\$2,000.00
Name of bank(s) used: Brook	line Bank
Affidavit of Committee Treasurer: I certify that I have examined this report, including attached belief, a true and complete statement of all campaign finance expenditures, disbursements, in-kind contributions and liabili finance activity of all persons acting under the authority or requirements of M.G.L. c. 55. Signed under the penalties of perjury:	activity including all contributions, loans, receipts, ties for this reporting period and represents the camp
Treasurer's signature (in ink)	(/)6/10 Date
Desident as conditate (about 5 has and 1)	
Affidavit of Candidate (check 1 box only): Candidate with Committee and no activity independer I certify that I have examined this report, and attached sched true and complete statement of all campaign finance activity, this committee in accordance with the requirements of M.G.L. of	ules and it is, to the best of my knowledge and belief of all persons acting under the authority or on behalf . 55. I have not received any contributions, incurred
any liabilities nor made any expenditures on my behalf during	- · ·

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
	ized Receipts emized Receipts ipts	\$0.00 \$0.39 \$0.39	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date Name and Address	Amount Purpose
Total Itemized Expenditures	\$0.00
Total Unitemized Expenditures	\$0.00
Total Expenditures	\$0.00

Schedule C: "In-Kind" Contributions

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total I	temized In-kind Contributions	\$0.00	÷
Total U	nitemized In-kind Contributions	\$38.82	
Total I	n-kind Contributions	\$38.82	

Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
4/20/2008	Ditkoff (Loan), Susan Wolf 145 Mason Terrace Brookline, MA 02446	\$2,000.00	Loan from candidate
Total Outst	anding Liabilities	\$2,000.00	



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign	and Political Finance
fassachusetts	RECEIVED
with:	TOWN OF BROOKLING
y or Town Clerk or Election Commission Please print or type all inf	ormation, except signatures. TOWN CLERK
Fill in dates: Month Date Yes	
Reporting Period Beginning 4 / /	0 Ending 4 25 10
Type of report: (Check one)	
☐8th day preceding preliminary	n ∐30 day after election ∐year-end report ∐dissolution
Full Name of Candidate (if applicable)	Committee Name
MARVIN A. FEINMAN	Now of Committee Treespoon
Office Sought and District	Name of Committee Treasurer
CONSTABLE BROOKLINE Residential Address	Committee Mailing Address
100 CENTRE ST #316, BROOKLINE	Committee Maning Audiess
77 1 1 1 ()	Tel No (entional)
6/7-731-5642 Tel. No. (optional)	Ten ito (opposition)
Line 1: Ending balance from pre	vious report \$
Line 2: Total receipts this period	(page 2, line 11) \$ 0 %
Line 3: Subtotal (line 1 plus line 2)	TOWN OF BROOKLINE formation, except signatures. TOWN CLERK formation, except signatures. TOWN CLERK The service of the servi
1	
<u>-</u>	4.9
Line 5: Ending balance (line 3 minus	(ine 4)
Line 6: Total in-kind contributions	this period (nose 1) \$ 75 00
T .	
Line 7: Total (all) outstanding liab	111tles (page 4) 5
Line 8: Name of bank(s) used	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and	it is, to the best of my knowledge and belief, a true and complete statement of
campaign finance activity, including all contributions, loans, receipts, expen-	ditures, disbursements, in-kind contributions and liabilities for this reporting per
M.G.L. c. 55. Signed under the penalties	
	Data
Treasurer's signature (in ink)	Date .
FOR CANDIDATE FILINGS OF	VI.V. (CANDIDATE MUST SIGN RELOW)
TOR CAMPIDATE FILLINGS OF	TISE (CAMPIDATION MOST SIGN BULLOW)
Affidavit of Candidate: (check 1 box only)	
Candidate with Committee and no activity independent of the committee and no activities and activities are activities and activities and activities are activities and activities and activities are activities	ittee it is, to the best of my knowledge and belief, a true and complete statement of
campaign finance activity, of all persons acting under the authority or on	behalf of this committee in accordance with the requirements of M.G.L. c. 55.
have not received any contributions, incurred any liabilities nor made any ex Candidate without Committee OR Candidate with independent active	
I certify that I have examined this report including attached schedules and	it is, to the best of my knowledge and belief, a true and complete statement of
campaign finance activity, including contributions, loans, receipts, expendi	itures, disbursements, in-kind contributions and liabilities for this reporting peri-
M.G.L. c. 55. Signed under the penalt	ties of perjury:
Marven a Terman	7/6/10
Candidate signature (in ink)	Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
:			
		,	
*			
	Total receipts in excess of \$50 (or listed above)		
	Total receipts \$50 and under* (not listed above) TOTAL RECEIPTS IN THE PERIOD		Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

mber on each	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		•••		
-			•	
···				
<u> </u>				
· .				
		Line 12	Expenditures over \$50	
			Expenditures \$50 and under	
4	Enter on page 1, line 4	Line 14	:TOTAL EXPENDITURES	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added

together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
4/1/10	STANCEY RABINOVITZ	117 THORNDIKE ST BROOKLINE	· SIGNATURE COCCECTION	75-
				-
-				
		Line 15:	In-kind over \$50	75-
		Line 16:	In-kind \$50 and under	
•	Enter on page 1, line 6	Line 17:	Total In-kind	75-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				:
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number Page 4 on each page.



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance REGI

TOWN	CEIVED
MEGISTRAR	CEIVED BROOKLINE S OF VOTERS
10 MAY 18	PH

	•	
Fi	ı	with:

TOWN OF REGISTRAR	BROOKLINE S OF VOTERS
10 May .	OF VOTERS
10 MAY 18	PH 1:55

	(ear Month Date Year O/O, Ending H 25 20/0
Type of report: (Check one) ■ 8th day preceding preliminary ■ 8th day preceding election	ion 30 day after election year-end report dissolution
TOMMY KITOLO	COMMITTED TO ELECT TOMMY
Full Name of Candidate (if applicable)	Committee Name
Office Sought and District Brokens	Name of Committee Treasurer
20 CHAPEL ST. # BYOZ	21 BARTUST CROSCONT
Residential Address	Committee Mailing Address
BROOKLINE, MA 02446	Ensekuno NA DEGGE
Tel, No. (optional)	Tel. No. (optional)
SUMMARY RALA	NCE INFORMATION:
Line 1: Ending balance from pro	
Line 2: Total receipts this period	
Line 3: Subtotal (line 1 plus line 2)	\$ 1219.
Line 4: Total expenditures this	period (page 3, line 14) \$ /35/ 29
Line 5: Ending balance (line 3 minu	
Line 6: Total in-kind contribution	s this period (page 4) \$ 1/9.82
Line 7: Total (all) outstanding liab	1
Line 8: Name of bank(s) used S	
campaign finance activity, including all contributions, loans, receipts, exper and represents the campaign finance activity of all persons acting under the	d it is, to the best of my knowledge and belief, a true and complete statement of enditures, disbursements, in-kind contributions and liabilities for this reporting peri the authority or on behalf of this committee in accordance with the requirements
M.G.L. c. 55. Signed under the penaltic	25 of perjury: 5/14/10
Treasurer's signa (ure (in ink)	Date
FOR CANDIDATE FILINGS O	ONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)	
campaign finance activity, of all persons acting under the authority or or have not received any contributions, incurred any liabilities nor made any condidate without Committee OR Candidate with independent acti	d it is, to the best of my knowledge and belief, a true and complete statement of m behalf of this committee in accordance with the requirements of M.G.L. c. 55. expenditures on my behalf during this reporting period.
campaign finance activity, including contributions, loans, receipts, expen-	ditures, disbursements, in-kind contributions and liabilities for this reporting peri the authority or on behalf of this committee in accordance with the requirements
- Andrew Viver	
Candidate signature (in ink)	Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
	COOK, ERNEST			
4111/6	4 BUSTON ST. BROOKLING	150	<u> </u>	
411/16	DITKOFF, JOSEPH 145 MASON TERM. BROOKING	100	_	
4/25/1	FISCHER, ANDREW 21 BARTIETH CRESS BROOKENED		-	
· · · · · · · · · · · · · · · · · · ·				
·····				
		\ \ <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </u>		
	Total receipts in excess of \$50 (or listed above)	350		
Line 10:	Total receipts \$50 and under* (not listed above)	869	<u> </u>	
	TOTAL RECEIPTS IN THE PERIOD	1219	-	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above. Page 2

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

umber on eac Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt .
4/8/2010	Red Can buse	94 GREEN ST. BOSTON, M. 02130	printing	371	88
1/15/2010	red and brea	CH CREEN ST BOSTON, MA 18430	printing	531	25
4/13/2010	NS POSTAL SERVICE	Brokuns '	potope	280	_
4123/291	US POSTAL SERVICE	Brookino,	partage	64	80
4/26/2010	the Poura	Breokini,	parter	78	00
· · · · · · · · · · · · · · · · · · ·					
<u>, </u>		Line 12	Line 12: Expenditures over \$50		
			: Expenditures \$50 and under		
	Enter on page 1, line 4	Line 1	4:TOTAL EXPENDITURE	s /,35/	2

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			. /	
· 				
•		•		
		Line 15:	In-kind over \$50	0
		Line 16:	In-kind \$50 and under	119.8
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} If an in-kind-contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
4/06/10	Tolkly VITOLO	20 Chapel St	of printing.	132.27
· .	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	13.2.27

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4



Form CPF M 102: Campaign Finance Report RECEIVED Municipal Form Office of Campaign and Political Finance REGISTRARS OF VOTERS

40 APR 15 AH 10: 18

City or Town Clerk or Election

Fill in dates: Month Date You Reporting Period Beginning Jan (2010	Ending April 28 25 (0
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election	on 30 day after election year-end report dissolution
Full Name of Candidate (if applicable)	Hugh June Civic Cosm Hugh June Ja
Office Sought and District Residential Address	Name of Committee Treasurer 29 Low ell Rd: Committee Mailing Address
SUMMARY BALAN Line 1: Ending balance from prev Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this per Line 5: Ending balance (line 3 minus)	(page 2, line 11)
Line 6: Total in-kind contributions to Line 7: Total (all) outstanding liability Line 8: Name of bank(s) used	ities (page 4) S O

Locatify that I have exam finance activity, including all contributions, loans, reccampaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Z0 10

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Cambidate: (check 1 hos only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all camps finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all camps finance activity, including contributions, loans, receipts, expenditures, dishursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Candidate signature (in ink)					
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all camps finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report. I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all camps finance activity, including contributions, loans, receipts, expenditures, disbursents, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:			* >-		
finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 35. I have not received contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report. I certify that I have examined this report including attached schedules and it is, to the test of my knowledge and belief, a true and complete statement of all campa finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:					
constributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campa finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjuny:					
Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campa finance activity, including contributions, loans, receipts, expenditures, distursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:					I have not received any
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:	contributions, incurred any liabiliti	es nor made any expenditures on my behi	of during this reporting period.	Francisco Company	
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campatinance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:					
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:	I certify that I have examined this	report including attached schedules and if	is to the best of my knowledge and	belief a true and complete sta	tement of all campaign
campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:	finance activity including contribu	dione loons receints expenditures dish	amements inskind contributions and	liabilities for this reporting po	riod and represents the
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	Candidate signature (in ink)			Date	5.00

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only thinks those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee mame and a page

manifer on each page.

Date Receive	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		Name of the second	
and the second s			
Line 9:	Total receipts in excess of \$50 (or listed above)	0	
Line 10:	Total receipts \$50 and under* (not listed above)	0	
Line H:	TOTAL RECEIPTS IN THE PERIOD	0	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

umber on eac Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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<u> </u>				
		Line 12:	Expenditures over \$50	6.0
		Line 13:	Expenditures \$50 and under	0
	Enter on page 1, line 4	Line 14	:TOTAL EXPENDITURES	1260 13

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$30. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*		Description of Contribution	Value
,	<u>-</u>			,
		Line 15:	In-kind over \$50	0
		Line 16:	In-kind \$50 and under	D
	Enter on page 1, line 6	Line 17:	Total In-kind	0

^{*} If an in-kind contribution is received from a serson who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 35 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

		Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	0
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Date To Whose Due Address Purpose Amoun				



Schedule E Municipal Form Disclosure of Assets Statement Office of Campaign and Political Figuree

with: City or Town Clark or	Section Commission	1//	<u> </u>				······································	
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Attack additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

TOWNREDEIVED
TOWN OF BROOKLINE REGISTRARS OF VOTERS
TEOLOTARIO OF VOTEDO

File wi	th:
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Fill in dates: Reporting Period Beginning 12 31 - 09 Ending 10 25 10 Type of report: (Check one) Bath day preceding preliminary 8th day preceding election 30 day after election spear-end report dissolution
Full Name of Candidate (if applicable) Stockling Civic ASN Committee Name Hagh A. DUNIAD VR
Name of Committee Treasurer 29 Low Ell Rd Blocklin's Residential Address Committee Mailing Address 617-232-6409
Tel. No. (optional)
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Treasurer's signature (in ink) Date
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Candidate signature (in ink)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)		unt	Occupation & Employer (for contributions of \$200 or more)	
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			·		
Line 9:	Total receipts in excess of \$50 (or listed above)	0			
Line 10:	Total receipts \$50 and under* (not listed above)	0			
Line 11:	TOTAL RECEIPTS IN THE PERIOD	0	1.	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		•		
_				
•				
• .				
			Expenditures over \$50	0
• • .			Expenditures \$50 and under : TOTAL EXPENDITURES	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	Ø
-		Line 16:	In-kind \$50 and under	6
	Enter on page 1, line 6	Line 17:	Total In-kind	0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	0

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4